Special Education Coding Criteria

2015/2016

Early Childhood Services (ECS) to Grade 12

Mild/Moderate

Gifted and Talented

Severe

Alberta Government

Special Education Coding Criteria 2015/2016

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This document is intended for:

Teachers	✓
Administrators	✓

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Introduction

The Ministerial Order on Student Learning (#001/2013) provides an overview of the goals, expectations and outcomes for an inclusive Kindergarten to Grade 12 education. This framework supports enabling all students to succeed and work toward high school completion. School authorities determine the level of support required to ensure student success in an educational program based on the programs of study.

Special Education Coding Criteria 2015/2016 outlines criteria within specific categories to help teachers and administrators in school authorities to identify those Early Childhood Services (ECS) children/students who require specialized supports and services. The need for specialized supports and services may be determined at any time. Schools need to have the documentation to support the assignment of a special education code. This includes a diagnosis of a disability or disorder by a qualified professional. In addition to this diagnosis, it is essential to have a clear indication of how the disability/disorder affects the ECS child's/student's learning in an educational environment.

School authorities are expected to include a special education code, where appropriate, as part of a 2015/2016 registration. Each category is given a code for the purpose of reporting special education data to Alberta Education. Use of the codes allows Alberta Education to collect one of many pieces of demographic information that can assist the ministry in better planning for the overall improvement of the education system. This information is not used by the ministry to determine a student's eligibility for particular types of placement and/or programming.

UPDATE

For the purposes of special education funding, ECS child/student registrations should be assigned only one special education/exception code. This code should best describe the overall learning needs of the ECS child/student. Provincial Approach to Student Information (PASI) allows for a maximum of two exception codes; however, this is usually only indicated when a child/student has a dual exceptionality – i.e. gifted and talented and a visual disability.

The *Diagnostic and Statistical Manual of Mental Disorders – Fifth Edition: DSM-5* (DSM-5) has been considered in the updates to *Special Education Coding Criteria 2015/2016*. However, this document is not intended to provide diagnostic criteria for clinicians but rather to provide educators with information to help identify and program for ECS children/students with an identified need.

For further information about programming, refer to:

- *Ministerial Order on Student Learning (#001/2013)*
- *Standards for Special Education, Amended June 2004*
- *Standards for the Provision of Early Childhood Special Education (2006)*
- *Requirements for Special Education in Accredited Funded Private Schools (2006)*
- *Handbook for the Identification and Review of Students with Severe Disabilities 2015/2016*
- The Inclusive Education Library: www.learnalberta.ca/content/ieptLibrary/index.html
- Regional Collaborative Service Delivery information: www.education.alberta.ca/admin/supportingstudent/collaboration/rcsd.aspx .

Mild/Moderate including Gifted and Talented (ECS to Grade 12)

MILD COGNITIVE (INTELLECTUAL) DISABILITY

(ECS: Code 30; Grades 1 – 12: Code 51)

An ECS child/student identified as having a mild cognitive (intellectual) disability:

- Has been diagnosed by a qualified professional as demonstrating:
  - deficits in intellectual functioning, such as reasoning, problem solving, planning, abstract thinking, judgment, academic learning, and learning from experience; and
  - adaptive behaviour skills in the mild range as measured on an adaptive behaviour scale[1].
- Receives support/intervention for behaviours that interfere with learning, for example: demonstrated delays in intellectual functioning in most academic subjects, and social behaviours as compared to his or her same-age peers.

MODERATE COGNITIVE (INTELLECTUAL) DISABILITY

(ECS: Code 30; Grades 1 – 12: Code 52)

An ECS child/student identified as having a moderate cognitive (intellectual) disability:

- Has been diagnosed by a qualified professional as demonstrating:
  - deficits in intellectual functioning, such as reasoning, problem solving, planning, abstract thinking, judgment, academic learning, and learning from experience; and
  - adaptive behaviour skills in the moderate range as measured on an adaptive behaviour scale[2].
- Receives support/intervention for behaviours that interfere with learning and requires programming that reflects significant modifications to basic curriculum and instruction in literacy, numeracy and living/vocational skills.

EMOTIONAL/BEHAVIOURAL DISABILITY

(ECS: Code 30; Grades 1 – 12: Code 53)

An ECS child/student identified with a mild to moderate emotional/behavioural disability exhibits chronic and pervasive behaviours that interfere with the learning and safety of the ECS child/student, other ECS children/students and staff.

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[1] American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. Arlington, VA, American Psychiatric Association, 2013.

[2] American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. Arlington, VA, American Psychiatric Association, 2013.

Typically, behaviour disabilities are characterized by a number of observable behaviours that could include:

- An inability to establish or maintain satisfactory relationships with peers or adults.
- A general mood of unhappiness, moodiness, irritability, withdrawal, temper outbursts, fearfulness, avoidance.
- Inappropriate behaviour or feelings under ordinary conditions.
- Continued difficulty in coping with the learning situation in spite of remedial intervention.
- Physical symptoms or fears associated with personal or school problems.
- Difficulties in accepting the realities of personal responsibility and accountability.
- Physical violence toward other persons and/or physical destructiveness toward the environment.

For students in Grades 1 – 12, in addition to a diagnosis by a qualified professional, school authorities are required to have documentation completed by school staff indicating the quality, nature, frequency and severity of the disability within an educational environment.

LEARNING DISABILITY (Grades 1 – 12: Code 54)

Learning Disabilities refer to a number of disorders which may affect the acquisition, organization, retention, understanding or use of verbal or nonverbal information.[3]

The DSM-5 uses the term "Specific Learning Disorder" to identify various types of learning disabilities. The determination of a Learning Disability/Specific Learning Disorder must be based on a diagnosis by a professional.

Learning disabilities range in severity (mild, moderate, or severe) and may result in difficulties in one or more of the following areas:

- oral language (e.g., listening, speaking, understanding);
- reading (e.g., decoding, phonetic knowledge, word recognition, comprehension);
- written language (e.g., spelling and written expression); and
- mathematics (e.g., computation, problem solving)[4].

To help individuals with learning disabilities be successful, it is necessary to ensure early identification and provide interventions, as appropriate, involving home, school, community and workplace settings. The interventions need to be appropriate for each individual's type of learning disability and, at a minimum, include the provision of:

- specific skill instruction;

[3] Learning Disabilities Association of Canada, Official Definition of Learning Disabilities. Retrieved in 2014 from: http://www.ldac-acta.ca/learn-more/ld-defined/official-definition-of-learning-disabilities.

[4] Learning Disabilities Association of Canada, Official Definition of Learning Disabilities. Retrieved in 2014 from: http://www.ldac-acta.ca/learn-more/ld-defined/official-definition-of-learning-disabilities.

- accommodations;
- compensatory strategies; and
- self-advocacy skills.

For more information on programming for students with learning disabilities, please visit the Inclusive Education Library at:
www.learnalberta.ca/content/inmdict/html/learning_disabilities.html

HEARING DISABILITY (ECS: Code 30; Grades 1 – 12: Code 55)

An ECS child/student identified with a mild to moderate hearing disability is one who:
- Has a hearing condition that affects speech and language development, and interferes with the ability to learn.
- According to one of the more commonly used classification systems, has a mild hearing loss of 26 to 40 decibels, or a moderate hearing loss of 41 to 70 decibels unaided in the better ear over the normal speech range of 500 to 4000 Hz.[5].

VISUAL DISABILITY (ECS: Code 30; Grades 1–12: Code 56)

An ECS child/student identified with a mild to moderate visual disability is one who:
- Has vision so limited that it interferes with the ability to learn, and requires modification of the learning environment.
- Is designated as having limited vision with a visual acuity of less than 20/70 (6/21 metric) in the better eye after correction, and/or a reduced field of vision.

COMMUNICATION DISORDER/DELAY (ECS: Code 30)

A child identified with a mild to moderate communication disorder/delay is one who:
- has a diagnosed mild or moderate disorder or identified delay in expressive and/or receptive language; or
- has a diagnosed disorder/delay in articulation, phonology, voice, fluency and/or social (pragmatic) communication; or
- is at risk for learning difficulties as demonstrated by education-based assessments, which may include tests of phonological awareness.

Clarification of Special Education Coding Criteria for Code 30:
http://education.alberta.ca/media/6734589/2014%205%20clarification%20of%20special%20education%20code%2030.pdf.

[5] Canadian Academy of Audiology. Retrieved in 2014 from: https://canadianaudiology.ca/for-the-public/hearing-loss-in-adults-and-children/.

COMMUNICATION DISABILITY (Grades 1 – 12: Code 57)

A student identified with a communication disability communicates ineffectively with peers and adults because of a diagnosed mild to moderate disability in:

- language: expressive and/or receptive; and/or
- speech sound: articulation, phonology, voice and/or resonance quality;
- fluency – stuttering; and
- pragmatics – social use of verbal and nonverbal communication[6].

PHYSICAL OR MEDICAL DISABILITY (ECS: Code 30; Grades 1 – 12: Code 58)

An ECS child/student identified with a mild to moderate physical or medical disability is one whose physical, neurological or medical condition interferes significantly with the ability to learn and requires adjustments to the learning environment.

MULTIPLE DISABILITY (ECS: Code 30; Grades 1 – 12: Code 59)

An ECS child/student identified with a multiple disability has two or more non-associated mild to moderate disabilities which have a significant impact upon his or her ability to learn. Some disabilities are closely associated, so would not be designated under this category. For example, ECS children/students with hearing disabilities frequently have communication disabilities, and ECS children/students with cognitive disabilities almost always have communication disorders.

GIFTED AND TALENTED (ECS to Grade 12: Code 80)

Giftedness is exceptional potential and/or performance across a wide range of abilities in one or more of the following areas:

- general intellectual
- specific academic
- creative thinking
- social
- musical
- artistic
- kinesthetic

For more information on programming for students who are gifted and talented, please visit the Inclusive Education Library at:
www.learnalberta.ca/content/ieptLibrary/lib08.html .

[6] American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. Arlington, VA, American Psychiatric Association, 2013.

Severe (ECS to Grade 12)

Schools are encouraged to use a variety of assessment techniques and strategies in order to assess an ECS child/student's current level of functioning in the learning environment. In some instances, ECS children/students with severe disabilities may be assessed by the use of a functional assessment rather than a traditional, standardized assessment. Functional assessments by a qualified professional will be considered in cases where the disabilities of the ECS child/student preclude a standardized assessment.

UPDATE

A **qualified professional** could refer to a variety of people depending on a child/student's area of need – e.g. psychologist, psychiatrist, audiologist, occupational therapist, speech-language pathologist. A qualified professional is an individual who has expertise and training in specialized assessments, interpreting results and providing program recommendations to those involved with a child/student's programming. They also meet the qualifications and standards established through a recognized professional association.

A **functional assessment** could include both formal (objective data such as a standardized behavioural checklist) and anecdotal and/or direct observations. The assessment should provide information about the quality, nature, frequency and severity of the ECS child/student's functioning in the educational environment in areas such as:

- social interaction
- communication
- behaviour
- life skills
- safety and support needs
- other learning considerations

SEVERE COGNITIVE (INTELLECTUAL) DISABILITY (Code 41)

An ECS child/student identified as having a severe to profound cognitive (intellectual) disability:

- Has been diagnosed by a qualified professional as demonstrating:
  - severe delays in all or most areas of daily living including significant deficits in intellectual functioning, such as: reasoning, problem solving, planning, abstract thinking, judgment, academic learning, and learning from experience; and
  - adaptive behaviour skills in the severe or profound range as measured on an adaptive behaviour scale[7].
- Receives support/intervention for behaviours that interfere with learning and requires ongoing support or is dependent on others for all aspects of daily living.

[7] American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. Arlington, VA, American Psychiatric Association, 2013.

SEVERE EMOTIONAL/BEHAVIOURAL DISABILITY (Code 42)

An ECS child/student with a severe emotional/behavioural disorder is one who:

- Displays chronic, extreme and pervasive behaviours and requires close and constant adult supervision, high levels of structure, and other intensive support services in order to function in an educational setting. The behaviours significantly interfere with both the learning and safety of the ECS child/student and other ECS children/ students. For example, the ECS child/student could be dangerously aggressive and destructive (to self and/or others), violent, extremely compulsive; withdrawn, delusional, paranoid.
- Has a diagnosis such as: conduct disorder, schizophrenia, bi-polar disorder, severe chronic depressive disorder, obsessive/compulsive disorders, trauma and stressor-related disorders, feeding and/or eating disorders, and may display self-stimulation or self-injurious behaviour. In the most extreme and pervasive instances, severe oppositional defiant disorder may be included under this code[8].
- ECS children may have either a diagnosis or a statement by a qualified professional indicating that the child experiences severe behavioural difficulties.

A clinical diagnosis of a severe emotional/behavioural disorder by a psychiatrist, registered psychologist, or a developmental pediatrician is required, in addition to extensive documentation of the quality, nature, frequency and severity of the disorder by school authorities.

In the case of ECS children who are not currently placed in an educational environment, extensive documentation of the nature, frequency, and severity of the disorder by the referring specialist may provide sufficient documentation. Where the professional is unable to provide a diagnosis, the school authority should maintain records of the nature of the behaviour exhibited by the child. The effects of the disability on the ECS child/student's functioning in an educational setting should be described.

An ongoing treatment plan/behaviour plan should be available and efforts should be made to ensure that the ECS child/student has access to appropriate mental health and therapeutic services.

NOTE
UPDATE

Students diagnosed with a **primary** diagnosis of attention-deficit/hyperactivity disorder (ADHD), or attention deficit disorder (ADD) are not included in this category.

NOTE

ECS children/students diagnosed with fetal alcohol spectrum disorder (FASD) or Selective Mutism should be reported under Code 44 rather than Code 42.

[8] American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. Arlington, VA, American Psychiatric Association, 2013.

SEVERE MULTIPLE DISABILITY (Code 43)

An ECS child/student with multiple disabilities is one who:

- Has two or more non-associated moderate to severe cognitive and/or physical disabilities that, in combination, result in the student functioning at a severe to profound level.
- Requires significant special programming, resources and/or therapeutic services.

ECS children/students with a severe disability and another associated disability should be identified under the category of the primary severe disability.

The following mild or moderate disabilities cannot be used in combination with other disabilities to qualify under Code 43:

a) attention deficit/hyperactivity disorder (ADHD) (ECS to Grade 12);
b) emotional/behavioural disabilities (ECS to Grade 12);
c) learning disability (LD) (Grades 1 to 12 only); and
d) speech and language-related disabilities (ECS to Grade 12)

NOTE ECS children/students diagnosed with Down syndrome and requiring extensive support in an educational environment should be reported under Severe Multiple Disability (Code 43).

SEVERE PHYSICAL OR MEDICAL DISABILITY (Code 44)

An ECS child/student with a severe physical, medical or neurological disability is one who:

- Has a medical diagnosis by a qualified professional of a physical disability, specific neurological disorder or medical condition which creates a severe impact on the ECS child/student's ability to function and learn in an educational environment (note: some physical or medical disabilities have little or no impact upon the ECS child/student's ability to function in the learning environment).
- Requires extensive adult assistance and modifications to the learning environment in order to benefit from schooling.
- **UPDATE** May have a *severe* diagnosis such as: autism spectrum disorder, fetal alcohol spectrum disorder/alcohol-related neurodevelopmental disorder (FASD/ARND), Tourette syndrome, cerebral palsy, brain injury, cancer, selective mutism, social (pragmatic) communication disorder.

For additional information on the criteria for code 44, please see the *Handbook for the Identification and Review of Students with Severe Disabilities 2015/2016*, available to school authorities through the Extranet.

DEAFNESS (Code 45)

An ECS child/student with a severe to profound hearing loss is one who:

- according to one of the more commonly used classification systems, has a hearing loss of 71 decibels (dB) or more unaided in the better ear over the normal speech range (500 to 4000 Hz) that interferes with the use of oral language as the primary form of communication, or has a cochlear implant preceded by a 71 dB hearing loss unaided in the better ear; [9]and
- requires extensive modifications and specialized educational supports; and
- has a diagnosis by a clinical or educational audiologist.

NOTE

New requests for approvals for Program Unit Funding (PUF) or Severe Disabilities Funding (SDF) in private or charter schools require an audiogram within the past three years.

BLINDNESS (Code 46)

An ECS child/student with severe vision impairment is one who:

- has corrected vision so limited that it is inadequate for most or all instructional situations, and information must be presented through other means; and
- has a visual acuity ranging from 6/60 (20/200) in the better eye after correction, to having no usable vision or a field of vision reduced to an angle of 20 degrees.

For those ECS children/students who may be difficult to assess (e.g., cortical blindness – developmentally delayed), a functional visual assessment by a qualified specialist in the field of vision or a medical professional may be sufficient to support eligibility.

SEVERE DELAY INVOLVING LANGUAGE (Code 47) – For ECS children only.

A child with a severe delay involving language is one who has difficulty communicating with peers and/or adults because of a **severe delay in expressive, receptive or total language.**

The following characteristics are used to determine eligibility in this category:

a) the child displays a severe delay in expressive, receptive or total language; **OR**

UPDATE

b) the child displays a severe speech sound delay/disorder (phonological, articulation, fluency) **AND** at least a moderate expressive, receptive or total language delay **AND** these result in the child functioning at a severe level; **OR**

c) the child displays at least a moderate to severe expressive, receptive or total language delay **AND** at least a moderate delay in one or more of the following

[9] Canadian Academy of Audiology. Retrieved in 2014 from: https://canadianaudiology.ca/for-the-public/hearing-loss-in-adults-and-children/.

areas of development: fine motor, gross motor, vision, hearing **AND** these result in the child functioning at a severe level; **OR**

d) a functional delay involving language which severely impacts communication and performance in the learning environment.

A severe delay involving language is assessed by a speech-language pathologist (SLP). A SLP may use a combination of standardized assessment tools, parent completed checklists and/or observational measures by a qualified professional to determine eligibility.

NOTE If the severe delay involving language is a result of a primary disability, assign the code for the primary disability to the child's registration (e.g. a child diagnosed with autism spectrum disorder should be assigned code 44).